

STATE OF SOUTH DAKOTA COUNTY OF (Case Caption)	IN THE CIRCUIT COURT OF THE JUDICIAL CIRCUIT CASE # DOCUMENT RETURN REQUEST
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I am requesting that the following document(s) submitted for scanning or as a trial exhibit in the above-named case be returned:

☐ I request that the documents be returned by mail and have provided a self-Addressed stamped envelope.

Date:

Signed:

Party or Party's Attorney of Record:

Address:

Phone #:

*This document and a self-addressed, stamped envelope must be submitted at the same time the document you want back is filed or the document filed may be destroyed 30 days from the time of filing

UJS 348 7/1/14